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COVER LETTER

TO: Registration Section Division of Corporations

Gilberto Valdes 1911, LLC

SUBJECT:

c.

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jacqueline Hernandez-Valdes, Esq.

Name of Person

Law Offices of Jacqueline Hernandez-Valdes

Firm/Company

2474 Secoffee Terrace

Address

Miami, FL 33133

City/State and Zip Code

jrhvesq@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacqueline Hernandez-Valdes		305	860-6015
·	at (()
Name of Person		Area Code	Davtime Telephone Number

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E138 (2/14)

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: _____Gilberto Valdes 1911, LLC

SECOND: The Florida Document Number of the limited liability company is:_____

THIRD: The street address of the limited liability company's principal office is:

3000 SW 97 Court

Miami, FL 33165

The mailing address of the limited liability company's principal office is:

3000 SW 97 Court

Miami, FL 33165

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.
a. Granted to:
b. No authority granted to:

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to : Gilberto Valdes

b. No authority granted to:

gnature of authorized representative

Gilberto Valdes

Typed or printed name of signature

Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E138 (2/14)

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